Filed 01/08/2008

10/10/2007

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT

JAN 0 8 2008

IN FORMA PAUPERIS APPLICATION

AND FINANCIAL AFFIDAVIT

Joseph Gunn
Plaintiff
v.

Dixon C.C.

Defendant(s)

		·				
more i provid I, (other without declar the co	nformation If the add	included, please place an X into whichever box applies. Wherever the answer to any question requires on than the space that is provided, attach one or more pages that refer to each such question number and itional information. Please PRINT: (eq) 1 (ou) (ou) (ou) (ou) (ou) (ou) (ou) (ou)				
1.		ou currently incarcerated? Name of prison or jail: DIX ON C.				
2.	Month Name	ou currently employed? One of the salary or wages: One of the salary of employer: One of the salary of employer of the salar of the				
	a.	If the answer is "No": Date of last employment: 1999+0 2002 Monthly salary or wages: 4 13.00 hr Name and address of last employer: 200 Steward 333 NOV41 10 Ke IC.				
	b.	Are you married? Spouse's monthly salary or wages: Name and address of employer:				
3.	Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same residence received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.					
	a. Amoun	Salary or wages Yes No				

	b. Business, profession or cother self-employment Amount 4/006 Received by COF1	□Yes ມ໘່	□No
	c. ☐ Rent payments, ☐ interest or ☐ dividends Amount Received by	□Yes	ÜNo
	d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurance compensation, ☐ unemployment, ☐ welfare, ☐ alimony or material compensation. ☐ Received by	aintenance or □ □Yes	y, □ workers] child suppor
	e. ☐ Gifts or ☐ inheritances AmountReceived by	□Yes	No
	f. Any other sources (state source: Mother) Amount & War K Received by	Yes	□No
4.	Do you or anyone else living at the same residence have more than savings accounts? In whose name held: Relationship to you:	amount:	
5.	Do you or anyone else living at the same residence own any stocks financial instruments? Property: In whose name held: Relationship to you:	□Yes	ANO
6.	Do you or anyone else living at the same residence own any real condominiums, cooperatives, two-flats, three-flats, etc.)? Address of property:	estate (houses	, apartments,
7.	Do you or anyone else living at the same residence own any automol homes or other items of personal property with a current market value Property: Current value:	of more than	\$1000?
8.	In whose name held: Relationship to you: List the persons who are dependent on you for support, state your relatindicate how much you contribute monthly to their support. If none, che the shirtey Gunn & 35.00 Ever father Joseph Ben & 50.00 Ever father Joseph Ben & 50.00 Ever father for the support of th	neck here □No	dependents

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 12-22-07

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE

(Incarcerated applicants only) (To be completed by the institution of incarceration)

I certify that the applicant named herein,	Joseph Gunn	, I.D.#	K57163	_, has the sum of
\$141.68 on account to his/her c	redit at (name of inst	titution) Di	xon Correc	tional Center
I further certify that the applicant has the	following securities t	o his/her cre	edit: unkno	wn . I further
certify that during the past six months th	e applicant's average	monthly de	posit was \$_s	ee attached
(Add all deposits from all sources and the	en <u>divide</u> by number	of months).		
1-2-08 DATE	<u>Nedna</u> SIGNATU	Chard IRE OF AU	lu (zn) THORIZED O	FFICER
	Nedra	Chandler		
	(Prin	t name)		

rev. 10/10/2007

Date: 1/2/2008 Time: 11:40am

Trust Fund

Inmate Transaction Statement

REPORT CRITERIA - Date: 07/02/2007 thru End;

Transaction Type: All Transaction Types;

Inmate: K57163; Active Status Only?: No; Print Restrictions ?: Yes; Print Furloughs / Restitutions ?: Yes; Include Inmate Totals?: Yes;

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Balance Errors Only?: No

Inmate: K57163 Gunn, Joseph

d_list_inmate_trans_statement_composite

Housing Unit: DXP-XA-A -25

Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
					Вес	jinning Balance:	10.39
07/11/07	Point of Sale	60 Commissary	192726	539221	Commissary	-10.26	.13
07/13/07	Payroll	20 Payroll Adjustment	194115		P/R month of 06/2007	10.00	10.13
07/25/07	Point of Sale	60 Commissary	206747	541098	Commissary	-8.35	1.78
08/16/07	Payroll	20 Payroll Adjustment	228115		P/R month of 07/2007	10.00	11.78
08/23/07	Point of Sale	60 Commissary	235732	543984	Commissary	-11.32	.46
09/14/07	Payroll	20 Payroll Adjustment	257115		P/R month of 08/2007	10.00	10.46
09/20/07	Point of Sale	60 Commissary	263726	547243	Commissary	-9.23	1.23
10/17/07	Payroll	20 Payroll Adjustment	290115		P/R month of 09/2007	10.00	11.23
10/25/07	Point of Sale	60 Commissary	298726	550505	Commissary	- 11. 1 9	.04
11/13/07	Payroll	20 Payroll Adjustment	317115		P/R month of 10/2007	10.00	10.04
11/16/07	Point of Sale	60 Commissary	320732	552808	Commissary	-8.97	1.07
11/26/07	Mail Room	01 MO/Checks (Not Held)	330250	266430	Gunn, Shirley	25.00	26.07
12/04/07	Point of Sale	60 Commissary	338732	554691	Commissary	-17.17	8.90
12/10/07	Mail Room	01 MO/Checks (Not Held)	344228	266843	Gunn, Shirley	25.00	33.90
12/12/07	Mail Room	01 MO/Checks (Not Held)	346228	702411	Bell, Joseph E.	40.00	73.90
12/14/07	Payroll	20 Payroll Adjustment	348115		P/R month of 11/2007	10.00	83.90
12/14/07	Disbursements	84 Library	348315	Chk #77524	84817696, DOC: 523 Fund Librai Inv. Date: 12/11/2007	·, -1.20	82.70
12/14/07	Disbursements	80 Postage	348315	Chk #77525	80816880, DOC: 523 Fund Inmat Inv. Date: 12/05/2007	e,41	82.29
12/14/07	Disbursements	80 Postage	348315	Chk #77525	80816919, DOC: 523 Fund Inmat Inv. Date: 12/05/2007	e,41	81.88
12/14/07	Disbursements	80 Postage	348315	Chk #77525	80817441, DOC: 523 Fund Inmat Inv. Date: 12/10/2007	e,82	81.06
12/14/07	Disbursements	80 Postage	348315	Chk #77525	80818224, DOC: 523 Fund Inmat Inv. Date: 12/14/2007	e, -1.14	79.92
12/18/07	Point of Sale	60 Commissary	352732	556475	Commissary	-21.97	57.95
12/24/07	Mail Room	01 MO/Checks (Not Held)	358230	704161	Bell, Joseph	40.00	97.95
12/24/07	Mail Room	01 MO/Checks (Not Held)	358230	704160	Gunn, Jason	20.00	117.95
12/24/07	Mail Room	01 MO/Checks (Not Held)	358230	267374	Gunn, Shirley	25.00	142.95

Total Inmate Funds:	142.95
Less Funds Held For Orders:	.00
Less Funds Restricted:	1.27
Funds Available:	141.68
Total Furloughs:	.00.
Total Voluntary Restitutions:	.00.

RESTRICTIONS

Invoice Date	Invoice Number	Туре	Description	Vendor	Amount
12/17/2007	80818727	Disb	Postage 12/17/07	99999 DOC: 523 Fund Inmate Reimburseme	\$0.41
12/18/2007	80819054	Disb	Postage-12/18/07	99999 DOC: 523 Fund Inmate Reimburseme	\$0.41
12/31/2007	80820628	Disb	Postage 12/31/2007	99999 DOC: 523 Fund Inmate Reimburseme	\$0.41

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11:40am Trust Fund

REPORT CRITERIA - Date: 07/02/2007 thru End; Inmate: K57163; Active Status Only?: No; Print Restrictions?: Yes; Transaction Type: All Transaction Types; Print Furloughs / Restitutions?: Yes; Include Inmate Totals?: Yes; Print

Balance Errors Only ?: No

Inmate: K57163 Gunn, Joseph Housing Unit: DXP-XA-A -25

RESTRICTIONS

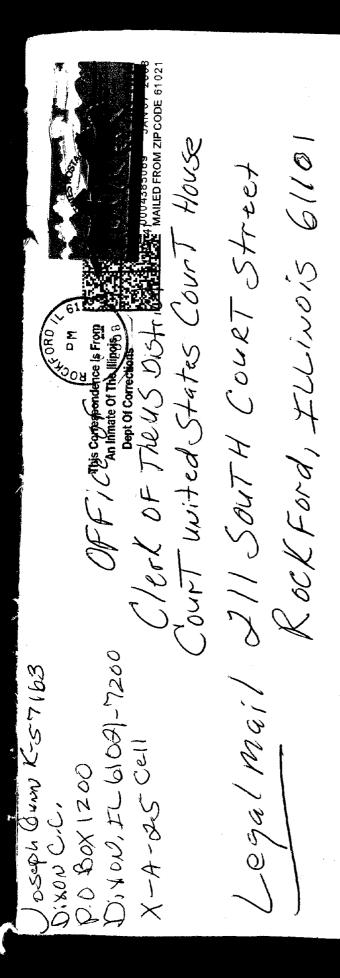
Date: 1/2/2008

Time:

Invoice Date	e Invoice Number	Type	Description	Vendor	Amount
01/02/2008	80820813	Disb	Postage 1/2/08	99999 DOC: 523 Fund Inmate Reimburse	eme \$0.04

Total Restrictions: \$1.27

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